## UNITED STATES DISTRICT COURT

for the

Eastern District of Missouri					
MOUNT VERNON SPECIALTY INSURANCE COMPANY	) - )				
Plaintiff	)				
v.	) Civil Action No. 4:22-cv-583				
CHIPPEWA LOFT, LLC	) )				
Defendant	)				
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address) GURPREET S. PADD/ 6918 Washington Ave. St. Louis, MO 63130					
A lawsuit has been filed against you.  Within 21 days after service of this summons of	on you (not counting the day you received it) — or 60 days if you				
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:					
Ellen J. Brooke RYNEARSON, SUESS, SCHNURBUSCH & CHAMPION, LLC 500 N. Broadway, Suite 1550 St. Louis, MO 63102					
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.					
	CLERK OF COURT				
Date:					
	Signature of Clerk or Deputy Clerk				

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Civil Action No. 4:22-cv-583

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for <i>(nan</i>	ne of individual and title, if any)				
was re	ceived by me on (date)					
	☐ I personally served	the summons on the individual	at (place)			
			On (date)	; or		
	☐ I left the summons	I left the summons at the individual's residence or usual place of abode with (name)				
	, a person of suitable age and discretion who resides there,					
	on (date) , and mailed a copy to the individual's last known address; or					
	☐ I served the summo	ns on (name of individual)		, who is		
	designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the summ	nons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty	of perjury that this information	is true.			
Date:			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: